

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of _____

Town of _____

or _____

City of Globe

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 165

County Registrar No. _____

Local Registrar No. 203

No. Gila County Hospital Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child John Goetter

(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child m.
To be answered ONLY in event of plural births.

4. Twin, triplet or other _____

6. Legitimate? Yes

7. Date of birth Sept 24 1927
Month Day Year

5. No., in order of birth 1

8. FATHER

Full name Paul B. Goetter

9. Residence (Usual place of abode) Finalva Mex.
If non-resident, give place and state.

10. Color or race w.

11. Age at last birthday 43 (Years)

12. Birthplace (city or place) Chicago Ill
(State or country)

13. Occupation mining engineer
Nature of industry

14. MOTHER

Full maiden name Ruperta Jaquin

15. Residence (Usual place of abode) Finalva Mex.
If non-resident, give place and state.

16. Color or race Mex.

17. Age at last birthday 22 (Years)

18. Birthplace (city or place) Oxaca Mex.
(State or country)

19. Occupation Housewife
Nature of industry

20. Number of children of this mother
(Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 1
(b) Born alive but now dead _____
(c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum?

Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was Born alive at 7:30 p.m. on the date above stated
(Born alive or stillborn)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Ruperta Jaquin (Physician or midwife)

Address Globe Ariz

Given _____
Month, day, year

Filed Sept 30 1927 H. H. Horst
Local Registrar.

Registrar

Filed _____, 19____

County Registrar.

179-924-915